#### 215.15

# **Physical Presence at Certification**

### **Overview**

#### Introduction

This policy describes when physical presence is required and the situations when exceptions may be made. When an applicant is exempted from being physically present, the parent/guardian or proxy must bring all of the other necessary documents to determine WIC eligibility including:

- Income
- Identity
- Address
- Height and weight measurements  $\leq$  60 days old (children)
- Length and weight measurements  $\leq$  60 days old (infants)

#### Physical presence of applicants is optimal

Physical presence at certification provides the opportunity for WIC personnel to observe and physically assess each applicant's nutrition and health status. Immediate needs for medical attention or other social services can be readily identified and referrals made to other providers. Participants also have the opportunity to actively participate in nutrition education activities and receive other on-site services such as immunizations or lead screening. However, requiring physical presence presents barriers to service for working or student parents/caretakers. Local agencies are encouraged to accommodate these families by providing early morning, evening, and/or weekend appointments.

#### **Documenting physical presence**

Document physical presence in the WIC data system. If the applicant was not present, document the reason why an exemption was granted.

<u>Note</u>: If the certification is done while the participant(s) are still in the hospital, the benefits will not be issued until the participant calls the agency and notifies them that they have been discharged.

#### **Policy references**

- MPSF: WC-00-13-P Interim Rule: WIC Certification Integrity
- MPSF: WC-01-06-P: Food Delivery Systems

## **Initial WIC Certification**

#### **Policy**

Each applicant must be physically present for the initial WIC certification. The only exceptions include applicants who are:

- Medically fragile,
- Children of parents/caretakers who are medically fragile.

### **Definition of medically fragile**

Medically fragile applicants or parents/caretakers include individuals who have a medical condition that:

- Requires the use of medical equipment that is not easily transportable (making the individual technology-dependent),
- Requires confinement to bed rest, or
- May be exacerbated by coming in to the WIC clinic (e.g., severely compromised immune system).

<u>Note</u>: Medical exemptions should be approved in advance by the local WIC agency to ensure that appropriate documentation is brought to the clinic to complete certifications.

#### Length of medical exemptions

An applicant is exempt for only one certification period in the case of short-term medical situations or conditions. However, extended exemptions may be granted in the case of long-term or permanent conditions.

# **Subsequent Certifications for Children**

#### **Policy**

All children must be physically present at least every other certification. Infants certified to their first birthday must be present at the 12-month certification appointment. Infants certified after they are 6 months old can be exempted from clinic at their second certification if all parameters are met.

### **Exemptions for children**

Local agencies may exempt children from being physically present at a subsequent certification appointment if the child:

Was present at the initial WIC certification, and

- Has documentation of ongoing health care from a provider other than the local WIC agency, and
- Is under the care of working parents/caretakers whose working schedule(s) present a barrier to bringing the child to the WIC clinic.

<u>Note</u>: For the purposes of this policy, the definition of working includes parents/caretakers in school. If there are two parents in the household, both must be working or in school to be eligible for this exemption.

#### Documentation of ongoing health care

Documentation of ongoing health care means written documents that substantiate statements made by the parent/caretaker. Examples of acceptable documentation include but are not limited to:

- Written communication from the provider or the provider's staff on stationary or prescription pads bearing the name of the provider's practice,
- Referral data recorded on a Nutrition Health History card that clearly identifies the provider's name,
- A bill or Explanation of Benefits statement listing services provided, and
- A copy of a physical form for preschool or for other purposes.

#### Notes:

- When acceptable documentation is provided, write a nutrition care plan that includes a statement about the child's ongoing health care.
- If the parent/caretaker fails to bring documentation, continue with the certification appointment. Send or fax a Request for Information form to the child's primary health care provider requesting documentation of ongoing care. When documentation is received, write a nutrition care plan with a statement about the child's ongoing health care.